## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 1-0./524066

i		CLAIMS	AS FILED	- PART	ſ							
CLAIMS AS FILED - PART I  (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN SMALL ENTITY	
U.S. NATIONAL STAGE FEES								RATE	FEE	7	RATE	FEE
BASIC FEE			SMALL ENT	T. = \$ 150	LAR	GE ENT. = \$ 300	1	BASIC FEE	+	OR		
EXAMINATION FEE			Satisfies PCT (4) = \$ 50	Article 33(1)- 0 / \$ 100		other situations = \$ 100 / \$ 200		EXAM. FEE	<del>                                     </del>	-	EXAM. FEE	300
SEARCH FEE			U.S. is ISA = ALL other co	U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		other situations = \$ 250 / \$ 500		SEARCH FEE	<del>                                     </del>	-	SEARCH FEE	200
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 =	1	X \$ 125 =	<del>                                     </del>	1	X \$ 250 =	408
TOTAL CHARGEABLE CLAIMS			minus 20 =		. 9			X \$ 25 =	<del>                                     </del>	OR	X \$ 50 =	1.
INDEPENDENT CLAIMS			minus 3 =		*	\ \		X \$ 100 =	<del> </del>	OR	X \$ 200 =	400
MULTIPLE DEPENDENT CLAIM PRESENT								+ \$ 180 =	-	OR	+ \$ 360 =	200
* If the difference in column 1 is less than zero, enter "0" in column 2							!!	TOTAL		OR	TOTAL	
		CI AIMC AC	AMENDED									<u></u>
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	•	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	n 2)	(Column 3)				-	, ,	
		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID FO	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
								OTAL ADDIT. FEE		OR L	TOTAL ADDIT. FEE	
* [i	the entry in colur	nn 1 is less than the	entry in column 2,	, write "0" in (	column	<b>3</b> .						
II	the "Highest Nur	mber Previously Paid mber Previously Paid	For" IN THIS SPA	ACF is loss th	יחכי חבר	ontor #20"						

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.